

Type a plus sign (+) inside this box → +

0010/PTO
Rev. 6/95U.S. Department of Commerce
Patent and Trademark Office

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration OR Declaration
Submitted Submitted after
with Initial Filing Initial Filing

Attorney Docket Number 2727-99J

First Named Inventor Kornelia Berghof

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"Nucleic Acid Molecule, Test Kit and Use"*(Title of the Invention)*

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)

07/21/1998

as United States Application Number or PCT International

Application Number

PCT/EP98/04510

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
197 31 292.6	Germany	07/21/1997	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

Type a plus sign (+) inside this box →

DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name _____ Customer Number or label _____
 OR
 List attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Joseph C. Sullivan	18,720	Ronald R. Santucci	28,988
Gerald Levy	24,419	Ronald E. Brown	32,200
		John F. Gulbin	33,180
		Richard J. Danyko	33,672

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: Customer Number or label _____ OR Fill in correspondence address below

Name | Ronald R. Santucci

Address | Pitney, Hardin, Kipp & Szuch, LLP

Address | 711 Third Avenue, 20th Floor

City | New York, State | NY ZIP | 10017

Country | U.S.A. Telephone | 212-687-6000 Fax | 212-682-3484

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name	Kornelia	Middle Initial		Family Name	Berghof	Surfix e.g. Jr.	
------------	----------	----------------	--	-------------	---------	-----------------	--

Inventor's Signature		Date	
----------------------	--	------	--

Residence: City	Berlin	State		Country	Germany	Citizenship	German
-----------------	--------	-------	--	---------	---------	-------------	--------

Post Office Address	Rhodelanderweg 85						
---------------------	-------------------	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City	Berlin	State	Zip	D-12355	Country	Germany	Applicant Authority
------	--------	-------	-----	---------	---------	---------	---------------------

Additional inventors are being named on supplemental sheet(s) attached hereto.

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	Alexander	Middle Initial		Family Name	Gasch	Suffix e.g. Jr.
------------	-----------	----------------	--	-------------	-------	-----------------

Inventor's Signature

Date

Residence: City	Berlin	State		Country	Germany	Citizenship	German
-----------------	--------	-------	--	---------	---------	-------------	--------

Post Office Address Steegerstr. 71

Post Office Address						
---------------------	--	--	--	--	--	--

City	Berlin	State		Zip	D-13359	Country	Germany	Applicant Authority
------	--------	-------	--	-----	---------	---------	---------	---------------------

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	Charles	Middle Initial		Family Name	Mason-Brown	Suffix e.g. Jr.
------------	---------	----------------	--	-------------	-------------	-----------------

Inventor's Signature

Date

Residence: City	Berlin	State		Country	Germany	Citizenship	British
-----------------	--------	-------	--	---------	---------	-------------	---------

Post Office Address Wuhlischstr. 38

Post Office Address						
---------------------	--	--	--	--	--	--

City	Berlin	State		Zip	D-10245	Country	Germany	Applicant Authority
------	--------	-------	--	-----	---------	---------	---------	---------------------

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	Freimut	Middle Initial		Family Name	Wilborn	Suffix e.g. Jr.
------------	---------	----------------	--	-------------	---------	-----------------

Inventor's Signature

Date

Residence: City	Berlin	State		Country	Germany	Citizenship	German
-----------------	--------	-------	--	---------	---------	-------------	--------

Post Office Address Neue Kantstr. 9

Post Office Address						
---------------------	--	--	--	--	--	--

City	Berlin	State		Zip	D-14057	Country	Germany	Applicant Authority
------	--------	-------	--	-----	---------	---------	---------	---------------------

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	Arndt	Middle Initial		Family Name	Rolfs	Suffix e.g. Jr.
------------	-------	----------------	--	-------------	-------	-----------------

Inventor's Signature

Date

Residence: City	Rostock	State		Country	Germany	Citizenship	German
-----------------	---------	-------	--	---------	---------	-------------	--------

Post Office Address Gehlsheimerstr. 20

Post Office Address						
---------------------	--	--	--	--	--	--

City	Rostock	State		Zip	D-18055	Country	Germany	Applicant Authority
------	---------	-------	--	-----	---------	---------	---------	---------------------

 Additional inventors are being named on supplemental sheet(s) attached hereto